

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000065771

FILED
Jul 10, 2008
Secretary of State

Entity Name: AMERICAN BIKER RADIO, INC.

Current Principal Place of Business:

P.O. BOX 50738
JACKSONVILLE BEACH, FL 32240 US

New Principal Place of Business:

4155 TIDEVIEW DRIVE
JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address:

P.O. BOX 50738
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

4155 TIDEVIEW DRIVE
JACKSONVILLE BEACH, FL 32250 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KOZLOWSKI, JOHN S
Address: P.O. BOX 50738
City-St-Zip: JACKSONVILLE BEACH, FL 32240 US

Title: D () Delete
Name: KOZLOWSKI, ARLENE U
Address: P.O. BOX 50738
City-St-Zip: JACKSONVILLE BEACH, FL 32240 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KOZLOWSKI, JOHN S
Address: 4155 TIDEVIEW DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: D (X) Change () Addition
Name: KOZLOWSKI, ARLENE U
Address: 4155 TIDEVIEW DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN S KOZLOWSKI

PRES

07/10/2008

Electronic Signature of Signing Officer or Director

Date